



**Robert E. Bush**  
Naval Hospital

## Did you know?...

**Y**ou have the right to express your concerns about patient safety and quality of care.

There are several avenues open to you:

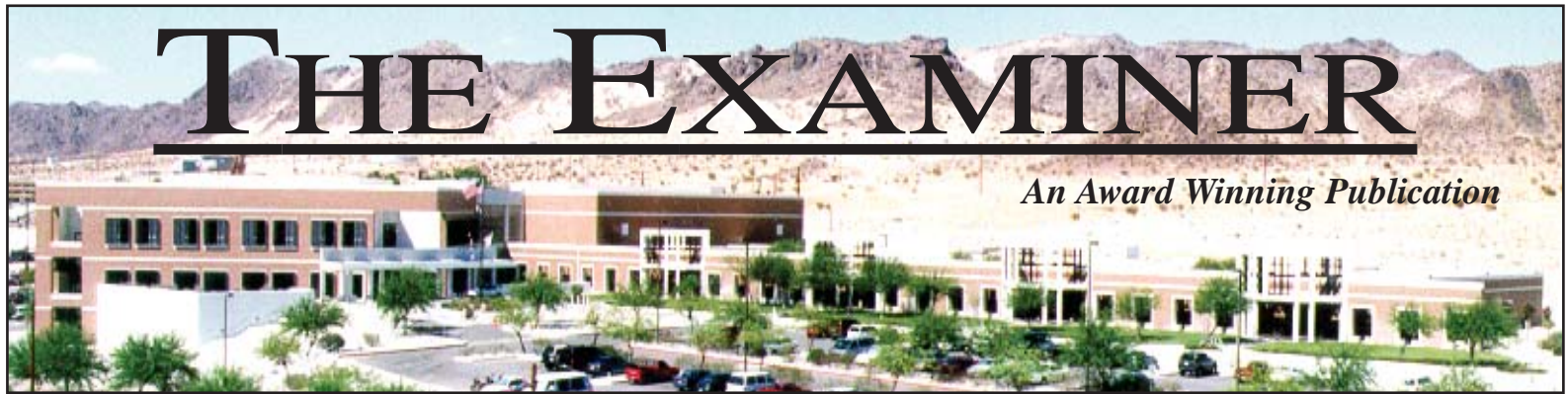
- \* Through the ICE website.
- \* The Hospital Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the Hospital clinics, or directly to the Joint Commission via: E-mail at [complaint@jointcommission.org](mailto:complaint@jointcommission.org) Fax: 630-792-5636

The Joint Commission  
Oak Renaissance Boulevard  
Oakbrook Terrace, IL 60181

**T**o report Fraud, Waste and Abuse contact one of the below offices by calling:

Naval Hospital: 760-830-2764  
Combat Center: 760-830-7749  
NavMedWest: 1-877-479-3832  
Medical IG: 1-800-637-6175  
DoD IG: 1-800-424-9098

Commanding Officer  
Naval Hospital Public Affairs Office  
Box 788250 MAGTFTC  
Twentynine Palms, CA 92278-8250



# THE EXAMINER

*An Award Winning Publication*

<http://www.med.navy.mil/sites/nhttp/pages/default.aspx>

## WBGT Index Available on Hospital Website

*By Dan Barber*  
*Public Affairs Officer*  
*Robert E. Bush Naval Hospital*

**J**ust in case you haven't noticed, it has started to get warmer out and we are now fast approaching the summer season here... it's important to pay attention to your environment to prevent heat stroke.

The Heat Condition Flag Warning System, determined by the Wet Bulb Globe Temperature Index (WBGT) reading, on the Combat Center is set up to help you determine your safe daily outdoor activities in the summer months.

The Robert E. Bush Naval Hospital also constantly monitors the "Mainside" WBGT in real time making it available on the hospital's internet at <https://admin.med.navy.mil/sites/nhttp/Pages/default.aspx> starting May 1 and will remain active through Sept. 30.

The WBGT index consists of a combination of readings from thermometers, providing temperatures for dry, humid and

radiant heat. These three temperatures are combined in a standard formula providing a more accurate reading of heat stress intensity, known as the WBGT Index.

Safety concerns with heat and PT are very real, especially in a desert environment. Dehydration is a constant threat when exercising in the heat. Since thirst occurs too late to be a good indicator of excessive water loss from the body, be sure to weigh yourself regularly during hot weather, especially if you're doing a lot of intense physical activity.

There is no specific temperature beyond which you should not exercise. People have become heat casualties even in subfreezing temperatures because they were overdressed. Any circumstances that cause your body's heat production to exceed its capability to cool off will often result in heat stress.

To alert Combat Center members of hazardous heat conditions, the following flags are flown to indicate readings and control physical activity:

**Green Flag --** WBGT Index Temperatures range from 80-84.9 -- Unrestricted physical activity may be carried out.

**Yellow Flag --** WBGT Index Temperatures range from 85-87.9 -- Physical activity should be limited to those people who have been exercising in similar heat for a minimum of 10 days or more.

**Red Flag --** WBGT Index Temperatures range from 88-89.9 -- Physical activity is advised only for members who have been working out in similar heat conditions for a period of 12 weeks for more.

**Black Flag --** WBGT Index Temperatures range 90 and above -- Vigorous outdoor exercise, regardless of conditioning or heat acclimatization, is not advisable.

Combat Center members should be advised to note WBGT reading on the hospital's web site before beginning outdoor workouts on the Main side

in the summer months. For Camp Wilson and Ranges, check with Marine Wing Support Squadron -- 374 (MWSS-374) Weather Office at 830-7809, as geographic locations on the base cause the WBGT Index to vary.

Although you do not have a choice about the characteristics of work clothing or gear, do not use a vapor barrier (rubber) suit as an aide for weight reduction while exercising. Exercising in a rubberized suit may result in severe dehydration and elevate your core body temperature. Wearing these suits also will not help you with your weight reduction program since the decrease in weight is due to a very temporary loss of fluid, not fat loss. If you are required to wear NBC gear or body armor you should add 10 points to the WBGT Index to determine your training activities.

Pay attention to your desert environment and be safe.

## Hospital, Branch Clinics Take Home the Gold Star

*By Martha Hunt, MA CAMF*  
*Robert E. Bush Naval Hospital*

**T**he Naval Hospital Twentynine Palms and the Branch Health Clinics at China Lake and Bridgeport have won the Navy Surgeon General's Health Promotion and Wellness Award Gold Star for 2012.

The Health Promotion and Wellness Award is an annual award sponsored by the Navy Surgeon General and managed by the Navy and Marine Corps Public Health Center. This award encourages Navy Medicine to lead by example to promote healthier lifestyles and screen all beneficiaries for health risks that can lead to early death and disability.

*Continued on page 3*

**Patients seen in February -- 13,034**

**Appointment No Shows in February -- 734**

In February we had a 5.3 percent no show rate. We need to keep trending downward by keeping the appointments we make, or by canceling in enough time for someone else to use the slot...

To help patients obtain appointments, the Naval Hospital now shows the number of open appointment slots each day on the hospital Facebook site, check it out.

**To make an appointment call -- 760-830-2752**

**To cancel an appointment call -- 760-830-2369**

# Pediatric Fever: A Hot Topic

By Lt. Alessandra Ziegler, RN, BSN, CCRN, CEN  
Emergency Medicine Department  
Robert E. Bush Naval Hospital

Fever is a common reason many of us seek medical care for either ourselves or our children. A sick loved one is a worrisome sight. Most of the time fevers are manageable from home with patience, vigilance and a little bit of tender love and care. In this article we'll discuss what a fever is, why it's important, what to do at home if a fever occurs, when to see your primary care provider, and when it is necessary to come to the Emergency Room for further care. Fever alone is not an illness but rather a symptom or sign of a sickness. A fever is actually a good thing for your body to have and is a positive sign an infection of some sort is being battled. It is the body's way of creating a warmer environment to essentially have the good guys, white blood cells, "cook" the bad guys, or bacteria. Fever, especially in the pedi-

atric population, is commonly associated with respiratory illness (pneumonia or croup), ear infections, influenza (flu), sore throats, and severe colds. Since a fever is the body's natural response to invading organisms, it is important to understand why we care so much about it. When a fever occurs, the body is placed in a state of stress and makes the child feel uncomfortable. The heart rate and breathing rate increase as the temperature rises to help the body compensate for the internal thermostat changes. Most medical professionals are taught, in a non-urgent setting to treat the patient not the numbers (i.e. vital signs). It is important to treat the patient not the "number" of the fever. For instance, if your child has a temperature but is behaving normally -- eating and sleeping well, periods of playfulness, adequate urinary output -- then it is not a priority to treat the fever. Once your child

becomes quite bothered and uncomfortable you may treat it with the following methods. First ensure that you have measured your child's temperature appropriately. In the Emergency Department we get a rectal, or core, temperature on most children under the age of three. After this age, an oral temperature is acceptable. Again, remember to treat the child not the temperature. A temperature is considered a fever if a rectal is more than 100.4f an oral/pacifier temperature is more than 100.0f, or an axillary (under the arm?) is more than 99.0f. It is appropriate to treat your child's fever with Ibuprofen (if older than 6 months) or Acetaminophen. Never administer aspirin to a child. These medications should be administered per weight based dosing. Most of the labels on these med-

ications, however, are by age. Please do not give any cold/cough medicine to your child under 2 years of age. Call your primary care physician's office or the Naval Hospital Twentynine Palms (NHTP) Patient Centered Medical Home Pediatrics or Gold/Blue Team (Family Medicine) clinics if you have any questions regarding appropriate dosing. Discuss fever medications with your doctor during your next well-

child exam to be proactive in treating your child. Here are some non-pharmacological, or non-medication, ways of treating a fever: Now that you know how to treat your child's temperature at home, here is when taking them to your primary care physician would be indicated. If you are concerned about your child's fever, call your doctor to book an appointment or physically walk into the clinic to

## Managing a Fever at Home Without Medicine

- \* Keep them home from school to rest and rehydrate in a comfortable environment
- \* Encourage them to drink extra fluids (water, Jell-O, popsicles, commercially prepared oral electrolyte solutions such as Pedialyte).
- \* Keep your child's room and your home comfortably cool, and dress them lightly.
- \* Place a fan nearby to keep cool air moving around the room.
- \* Sponging your child with lukewarm water in a bath.

Continued on page 7

# Pediatric Immunizations Keeps Children Healthy

When parents think about their child's health, the information available concerning immunizations can be overwhelming. Parents may ask "Which immunization should I allow my child to have? When should the immunization be given? Is this safe for my child?" Parents want to be assured that they are making the best decisions for their child's health. According to The Center for Disease Control and Prevention (CDC) immunization is defined as the process by which a person becomes protected against a disease. The term is often used interchangeably with vaccination or inoculation. Immunizations stimulate ones immune system to produce antibodies in the manner in which it would if one were exposed to the actual disease. After being immunized, immunity to the disease is developed. This prevents a person from having to get the disease first to develop immunity. Immunizations stop diseases from occurring whereas other medicines treat or cure diseases. The CDC and the American Academy of Pediatrics recommend that children are up-to-date with their vaccination schedule. Immunization schedules are created to protect children from potentially life threatening diseases early in life when they are most vulnerable. Immunizations not only save your child's life but the life of others and future generations as well by preventing the spread of disease. Because of immunizations, debilitating and sometimes fatal diseases are now reduced or eliminated. For more information about the importance of pediatric immunization, visit <http://www.cdc.gov/vaccines>.

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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# First Week of April is Public Health Week

*By Martha Hunt, MA CAMF  
Robert E. Bush Naval Hospital*

The theme of National Public Health Week is “Public Health Is Return On Investment (ROI).”

According to the American Public Health Association (APHA), ROI is measured by the amount of health impact when compared to resources invested.

In other words, for every dollar put into prevention such as prenatal care, immunizations, etc., many lives are saved. The public health ROI can be measured in lives saved, diseases and injuries mitigated or prevented and cost avoided.

For example, routine childhood immunizations save \$9.9 million in health care costs, save 33,000 lives and prevent 14 million cases of disease. A \$52 investment in a child safety seat prevents \$2,200 in medical costs and results in a return of \$42 for every \$1 invested. Similarly, a \$12 investment in a child’s bicycle helmet prevents \$580 in

medical costs and results in a return of \$48 for every \$1 invested.

Public health is often silent. It works in the background through laws, education programs, and regulations to ensure the health and safety of everyone.

free, there were 4,000 fewer heart attacks and \$56 million in health care costs saved.

According to the APHA, good health doesn’t happen by chance. Good health is connected to the environments in which we live, work and play, the resources available in our com-

***...Consider these public health successes:  
Seat belt use has gone from 11 percent in 1981  
to about 85 percent in 2010 and saved hundreds of thousands of lives...***

Consider these public health successes: seat belt use has gone from 11 percent in 1981 to about 85 percent in 2010 and saved hundreds of thousands of lives. If everyone wore their seat belt, even more lives would be saved. Most states and hundreds of cities and counties have adopted smoking bans in bars and restaurants saving thousands of lives by reducing rates of heart attacks. In the first year that New York City was smoke

munities, and a person’s access to health care. This is where public health enters the scene and helps improve health.

Nearly 1 million Americans die every year from preventable diseases. Chronic, preventable illnesses, such as heart disease and diabetes, account for 75 percent of U.S. health care spending or \$1.5 trillion per year. Yet only 3 percent of our health care dollars go toward preventing disease. When we

place all of our resources in treatment rather than prevention, we find that health care costs spiral out of control.

Public Health Today...A perfect example of public health at work is the Framingham Study. During the past 65 years, the Framingham Heart Study has produced many major discoveries that have helped scientists understand the development and progression of heart disease and its risk factors and has helped Americans protect the health of their hearts. The Framingham study is now on its third generation of participants.

Over the years, careful monitoring of the Framingham Study population has led to the identification of the major cardiovascular disease risk factors such as

high blood pressure, high blood cholesterol, smoking, obesity, diabetes, and physical inactivity. It has also provided a great deal of valuable information on the effects of related factors such as blood triglyceride and HDL cholesterol levels, age, gender, and psychosocial issues.

What would our lives and communities look like without public health? Public health initiatives have brought clean drinking water, safer roads, homes, schools and safer workplaces. For more information about how public health awareness benefits you, your family, community and nation visit The American Public Health Association (APHA) at [www.apha.org](http://www.apha.org).

## Take Home the Gold Star...

*Continued from page 1*

The leading drains on the DoD health care system -- and really any health care systems are largely preventable: tobacco, obesity and alcohol. The 2013 population health priorities for the DoD Military Health System include addressing these preventable health problems - lower the rates of tobacco use, alcohol abuse, and obesity.

The Navy Surgeon General’s Health Promotion and Wellness Award helps Naval Hospital Twentynine Palms and the Branch Clinics at Bridgeport and China Lake address those DoD health care goals by screening all patients for tobacco, alcohol, and obesity and help Navy Medicine staff lead healthier lives and lead by example.

Need help with your own personal goals? The Naval Hospital offers nutrition education services with a registered dietitian. Your primary care provider can place a referral to the dietitian for you. Health Promotion and Wellness offers one on one tobacco cessation counseling, stress management and sleep hygiene. Call (760) 830-2814 for more information. If improving your work out is your goal, the gyms offer excelled certified fitness trainers.

# Hospital Staff Expand Their Caring Skills to Livestock

*By HN Kylie Guest  
Public Affairs Representative  
Directorate of Surgical Services  
Robert E. Bush Naval Hospital*

Recently some of the staff in the Main Operating Room and the Post-Anesthesia Care Unit of the Naval Hospital volunteered at a local non-profit horse rescue ranch.

The group of Sailors and civilian staff donated their time to perform chores that were needed to help keep a horse ranch running. Volunteering allowed for the junior Sailors to take the initiative and lead their coworkers as well as use effective communication skills to get the job done.

The volunteers helped all around the White Rock Horse Rescue Ranch to include feeding the animals, mucking stalls, laying fence post, grooming and exercising the horses.

All volunteers were given the opportunity to saddle up and ride. For many volunteers that day was their first time riding horses.

White Rock Horse Rescue is a sanctuary for horses and other animals.

Currently the ranch houses 46 horses, 2 Alpaca, 7

dogs and 3 goats, which are all being given the opportunity to enjoy life at the Horse Rescue. Many of the animals came from abusive or neglected owners and White Rock Horse Rescue provides for the animals until they can be adopted by loving new owners. White Rock Horse Rescue also supports a retirement facility for horses that are too old to be ridden so they may live out their days in peace.

The White Rock Horse Rescue operates from donations and the work of volunteers. If interested in volunteering or making donations please visit [www.whiterockhorserescue.org](http://www.whiterockhorserescue.org).

In addition to the Volunteer time/work the Staff of the OR and PACU collectively donated approximately \$200.00 to the Ranch.

**Do you have a story about your Department or Clinic you want to share?... Contact your Directorate Public Affairs Representative**



# Super Stars...



*HM2 Joshua Bellavia, Public Health, receives a Letter of Appreciation from Marine Light Attack Helicopter Squadron 167.*



*HM1 Teri Charles, OB/GYN Clinic is piped ashore at her recent retirement ceremony.*



*Lt. Kimberly Burnes, Staff Nurse on the Multi-Service Ward, receives a Gold Star in lieu of her second Navy and Marine Corps Achievement Medal.*



*CS2 Robert Dalton, Combined Food Services, receives his second Good Conduct Award.*



*Farewell Frank Jacobelli, Branch Health Clinic Bridgeport. Serving the Marines and Sailors at the Mountain Warfare Training Center Clinic Since September 2009, he will now enjoy leisure time in retirement. (Photo by HM3 Albert Escobedo, Bridgeport Public Affairs Rep.)*



*Lt. Marcus Allen, right, is welcomed home by Capt. Jay Sourbeer, Commanding Officer, Naval Hospital Twentynine Palms.*



# Caregiver Occupational Stress Control Team Stresses Caregiver Wellness

By Lt. Cmdr. Anne Jarrett,  
CgOSC Team Member  
Robert E. Bush Naval Hospital

The members of the Caregiver Occupational Stress Control (CgOSC) Team are passionate about caregiver wellness. The CgOSC team seeks to enhance the well-being of caregivers through increasing the understanding and application of stress management.

The CgOSC team facilitates training and support within departments, at Command Orientation, at stand-downs training, and provides consultation for unit personnel and leadership.

One of the main teaching elements is the Stress Continuum. The Stress Continuum is a model that identifies how an individual reacts under stressful situations. It is based on a spectrum of stress responses and outcomes in individuals. Its four

stages - called zones - are color coded:

\* Green Zone is the good-to-go zone. Not stress free, but coping with stress in a healthy way.

\* Yellow Zone is the stress reaction zone. Includes common irritations, annoyances and worries that are usually mild and reversible and require little, if any, intervention. If not managed, though, the stressors can add up and lead to more serious problems.

\* Orange Zone is the stress injury zone. More severe and persistent stress that can include loss of function, nightmares, feelings of guilt or shame, and panic or rage attacks. Much less common than stress reactions in the Yellow Zone, these injuries typically are caused by life threats, loss (such as the death of a buddy or a relationship breakup), inner conflicts and continued wear-and-tear.

\* Red Zone is the stress illness zone. It includes clinical med-

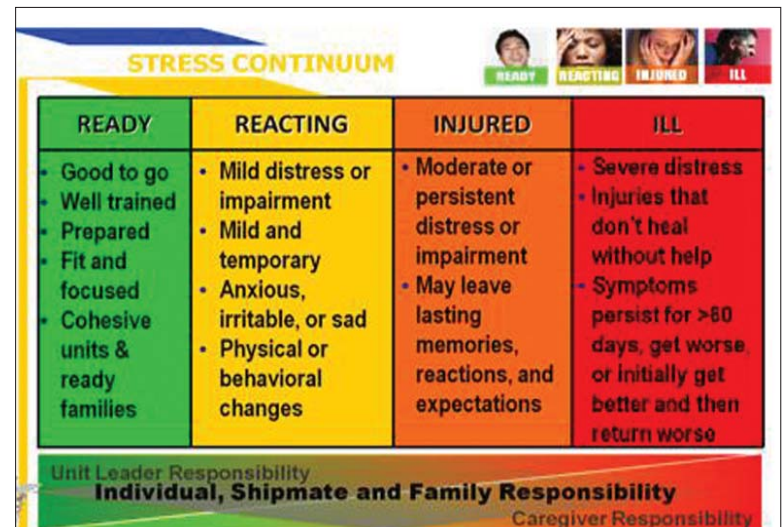
ical disorders that can only be diagnosed by health professionals. Stress illnesses are stress injuries that persist, get worse, or get better and then get worse. These illnesses include but are not limited to:

- \* post-traumatic stress
- \* major depression
- \* certain anxiety disorders
- \* alcohol or drug dependence.

There are multiple stressors in life but intense or prolonged stress can cause stress injuries. A trauma provoking helplessness/shock, fatigue from accumulation of stress over time, grief from a loss, or inner conflicts can all cause stress injuries.

We need to be able to identify and care for our shipmates and caregivers who may be headed for stress injuries. To identify a shipmate or caregiver in need of help we can apply the 7 'Cs' of Stress First Aid:

1. Check: Assess, observe and listen
2. Coordinate: Get help, refer



as needed

3. Cover: Get to safety ASAP
4. Calm: Relax, slow down, refocus
5. Connect: Get support from others
6. Competence: Restore effectiveness
7. Confidence: Restore self-esteem and hope

The above is only the beginning of tools and resources that

are available through the CgOSC Team. In April, the CgOSC Team will be receiving expert training from Dr. Bart Jarvis and Dr. Heidi Kraft of Naval Center for Combat and Operational Stress Control (NCCOSC).

Look for future articles regarding the group activities and resources.



Ensign Marie Chiong, Family Medicine Clinic, takes the oath at her recent promotion ceremony to Lieutenant Junior Grade.



Dr. Roxanne Farinpour, Deployment Health Clinic was voted by her clinic co-workers to receive the coveted "Fish Award" for excellence in Customer Service.



Lt. Cmdr Stacie Milavec, Director for Clinical Support Services, receives a Meritorious Service Medal.

Continued on page 8



# Continuing the Communication Channels

*By Dan Barber  
Public Affairs Officer  
Robert E. Bush Naval Hospital*

My career as the Public Affairs Officer at the Robert E. Bush Naval Hospital will end next month when I retire, but my relationship with the Hospital will continue... albeit as a health care consumer...hopefully on a very limited basis.

I will continue my curiosity about what is going on at the hospital? When flu shots and other health services will be given to retirees like myself? What the hours of operations are for the clinics and ancillary services? Who replaced my Primary Care Provider? Why can't I get an appointment when I want one? How do I give praise to a great Corpsman who provided me with a wonderful experience?... You noticed that I included all the important basic communication questions... Who, What, When, Why, Where, and How.

To this end, the command has established "Communications" as one of its strategic initiatives. Each directorate has assigned a Public Affairs Representative who is responsible for ensuring that information is fed to one of the communications channels the hospital uses. These communications links include:

- \* "The Examiner" which is published each month and inserted into the base newspaper "The Observation Post" normally on the first Friday of each month. "The Examiner" is also published on the hospital's Facebook page;
- \* Closed Circuit TV programming used to inform and educate patients in health care issues;
- \* Social media which includes Facebook, Twitter and a Health Blog. Each weekday morning the available appointments for the Blue, Gold and Pediatric Medical Home clinics are published on Facebook before the appointment lines open at 7:15 a.m;
- \* Information is also fed to the Combat Center's Joint Public Affairs Office (G5) to be included, as needed, in the Speedcall, an email message system, and on Combat Center radio and television broadcasts; and
- \* An important communication channel that cannot be overlooked is the Face-To-Face "2-step communications method." The hospital has a very active Customer Relations program with representatives in each department and clinic of the hospital. Patients with any issue they would like to discuss from a complaint to praise, should seek one of these representatives out for assistance. If not satisfied with the help received with one of

these reps, then you can also contact the HMC Tamara Marks, Customer Relations Officer, (CRO) who can be reached at 760-830-2825. Chief Marks is a special assistant to the Commanding Officer, Captain Jay Sourbeer. The Customer Relations Officer and clinic reps also provide input to the Communications team so educational information can be developed to help patients or the command's staff.

The leadership of the Naval Hospital as well as Navy Medicine is constantly searching for a way for patients as well as medical staff to provide feedback to the leaders so they can make informed decisions, and to provide the best possible health care service.

The Naval Hospital's Communications team is headed up by Lt.j.g. Ashley Robertson, NC. Robertson recently met with his team to discuss other communications strategies that can be used to reach the command's beneficiaries. One of the Public Affairs Reps, Hospitalman Kylie Guest, Surgical Services Directorate, pointed out that we need to push our social media communications out to our younger beneficiaries who are "wired" into instant communications through their smart phones. A plan was to set into motion with that suggestion to create some strategies to get the younger population of the Combat Center to "log on to learn" about services at the hospital. I recently discovered what a "QR" does, because I finally surrendered to peer pressure and purchased a smart phone... so we will be creating some

the qualifying travel date. TRICARE will use government rates to estimate the reasonable cost and will reimburse the actual costs of travel expenses up to the government rate for the area concerned. In some cases, a non-medical attendant (NMA) who travels with the patient may also be authorized for travel reimbursement. The NMA must be a parent, adult family member, legal guardian, or a companion who has been appointed medical power of attorney by the patient or legally responsible party.

To qualify, you must have a valid referral and travel orders from a TRICARE representative at your MTF (if enrolled to an MTF PCM)

You are expected to use the least costly mode of transportation and must submit receipts for all expenses.

Travel reimbursement claims must be filed no later than one year after

posters where patients can take a photo of our QR with their smart phone to automatically log on to our social media sites. This will be done as soon as I can figure out how to use my smart phone, other than making or receiving phone calls, to create a QR with the QR App... maybe I'll just get HN Guest to create the poster.

Feedback is also encouraged. The Command's Facebook, Twitter and Blog sites each have the capability to receive that feedback instantly. The only thing the hospital would like to see is for users to provide constructive criticism or even positive feedback about a good experience with the hospital. Personal attacks should be avoided as the social media sites are constantly monitored and can be viewed by anyone.

Good ideas are always welcomed, and many times incorporated into the health care of patients.

Because of the hospital's dedication to the protection of patient privacy, personal patient information will never be discussed on social media. For private consultation, beneficiaries should book an appointment with their health care team by calling 760-830-2752 or by calling the Customer Relations Officer at 760-830-2475. Another option beneficiaries of the Robert E. Bush Naval Hospital have is "Relay Health." Customers can log on to this secure site to communicate directly with their health care team at the Robert E. Bush Naval Hospital... check it out: <https://app.relayhealth.com/Registration.aspx?Status=new>

or from the TRICARE Regional Office (if enrolled to a civilian PCM) prior to seeking care. You should contact the or visit the TRICARE Service Center at the Robert E. Bush Naval Hospital for more information if you think you qualify for this travel reimbursement benefit.

Travel for ADSMs is reimbursed through other travel regulations. ADSMs should contact their unit representatives for information about traveling long distances for medical care. Local ADSMs are required to use MTFs in Southern California unless that care is unavailable.

## Care Far from Home -- Travel Reimbursement

# A Hot Topic...

Continued from page 2

## Reasons to Call Your Primary Care Physician

- \* Signs of dehydration (dry mouth, urinating less than usual, no tears when crying, less alert and less active than usual)
- \* Has a skin rash
- \* The child gets worse in any way
- \* Persistent diarrhea and/or repeated vomiting
- \* The fever lasts more than 3-5 days despite consistent, around-the-clock medication administration (Acetaminophen or Ibuprofen)
- \* Has a chronic medical problem like cancer, lupus, heart problems, or sickle cell disease
- \* Has a febrile convulsion

It is also important to know if your child’s vaccinations are up-to-date. Make sure to keep a record of this on hand to provide to medical staff for quicker treatment.

If at any point in time you are gravely concerned for your child’s well being, seeking emergency care is warranted if their primary care physician is unavailable. Ensure that your child is also not suffering from heat stroke -- fever due to environmental or external heat. If heat stroke is suspected, rapidly move the child to a cool place, remove all clothing, sponge them with cool water and fan them, then seek medical care immediately.

## Reasons to Seek Emergency Care Immediately

- \* If your child is an infant or younger than 3 months of age and has a temperature of 100.4f or higher.
- \* A febrile convulsion lasting more than fifteen minutes (be sure to turn your child’s head to the side so saliva and vomit can drain from the mouth -- do not put anything into your child’s mouth)
- \* Suspected heat stroke especially when there is no improvement in condition.

book a same-day appointment. At the NHTP clinics, the Medical Home initiative allows you to continue to seek care from your primary care physician or primary care team for your non-urgent needs. You may also call the on-call Medical Officer of the Day (760-830-2190) who can give you advice over the phone on how to treat your child’s temperature. Lastly,

you may use Relay Health, an online service, allowing you to email your primary care team. Please sign up at [www.RelayHealth.com](http://www.RelayHealth.com). Be advised: allow up to 72 hours for the staff to respond with an email message. Although sometimes frightening, especially to first time parents, fevers are virtually unavoidable and are a normal

body process we all experience at one time or another. The key message is to ensure your child has adequate comfort and hydration until the fever passes and to seek the appropriate medical care when necessary.

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## You have the Power?

Did you know that you have the power to influence how you are cared for at the Robert E. Bush Naval Hospital?

If you have recently received health care at the hospital you may receive a patient satisfaction survey form from the Navy’s Bureau of Medicine and Surgery regarding your visit. Your opinion about the service you received is very important to the staff here at the hospital and to our leadership in Washington, D.C. Please take a few minutes to complete and return the survey, noting our strengths and probably more importantly recommendations for areas to we need to improve. This data is very important to the leaders of the hospital.

If you have any questions or concerns whenever you receive care here, you are always welcome to speak to the command’s Customer Relations Representative, HMC Tamara Marks. She can be reached at 760-830-2475. You can also leave a comment with the Marine Corps Air Ground Combat Center’s ICE system and your questions or concerns will be promptly answered.

Your opinion counts with us and for you.



# Super Stars...

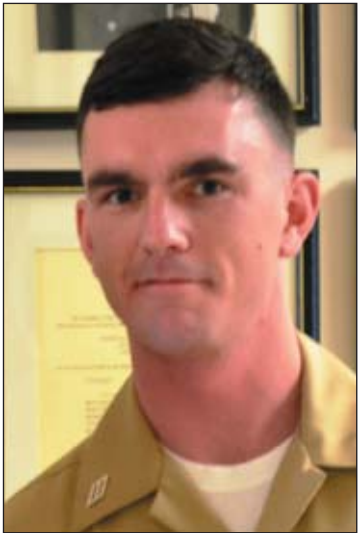
Continued from page 5



**HN Crista Pena, OB/GYN, receives a Navy and Marine Corps Achievement Medal.**



**Lt. Aileen Pletta, Physical Therapy, receives a Navy and Marine Corps Commendation Medal.**



**HN Cameron Fields, Branch Health Clinic Bridgeport, receives the Outstanding Performance Award from the Navy League of Nevada.**



**HM1 Timothy Nacinopa, Laboratory Dept., receives a Navy and Marine Corps Commendation Medal.**



**HM3 Robert Rose, Operation Management Dept., receives his first Good Conduct Award.**



**HM3 Rachel Sieber, Branch Health Clinic Bridgeport, receives her first Good Conduct Award.**



**Colleen Sawaia-Moore, Fiscal Dept., receives a 30-Year Federal Length of Service Award.**



**HM1 Tanya Wheeler, Command Career Counselor, receives her sixth Good Conduct Award.**



**Lt. Cmdr. Richard Eppey, a physician in the OB/GYN Dept., takes the oath during his recent promotion ceremony at the Joshua Tree National Park. Captain Jay Sourbeer, left, Commanding Officer Naval Hospital Twentynine Palms was the presiding officer for Eppey's ceremony. Photo by Lt. Gabriel Forrey, MSC**

(Photo by HM3 Albert Escobedo, Bridgeport Public Affairs Rep.)